Lie-Down Massager

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

As a below-named inventor, I hereby declare that: my residence, post office address, and citizenship are as stated below next to my name; I believe I am) the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

		pecification was filed on	(mm/dd/yyyy) as
the top of A. P. S. N. T. S.	, ,	1	
Inited States Application Number	; and amende	on (mm/dd/yyyy)	_ (if applicable) and/or
	nom*.	, , , , , , , , , , , , , , , , , , , ,	
e specification was filed on(mm/dd/		plication Number	and was
nended on(if a	pplicable).		
(mm/dd/yyyy)			
have read the applicable statutes and natter which is material under 37 C.F.	_	of this declaration which	understand to describe subject
hereby state that I have reviewed and y any amendment(s) referred to above polication in accordance with Title 3' inited States Code, § 119 of any foreign application for patent or inlaimed.	e. I acknowledge the duty to disc 7, Code of Federal Regulations, § ign application(s) for patent or inv	lose information which is rail. 1.56(a). I hereby claim for entor's certificate listed bel	naterial to the examination of this reign priority benefits under Title ow and have also identified below
rior Foreign Application(s)			
Application Number	Country	Date of Filing	Priority Claimed
			Yes No
			Yes No No
	and filed on (mm/dd	 /yyyy)	Yes No No al application(s) as provisional
•	and filed on (mm/dd) 35, United States Code, § 120 of a this application is not disclosed in States Code, § 112, I acknowledg (66(a) which occurred between the	/yyyy) my United States application the prior United States apeter the duty to disclose mater	Yes No
pplication number hereby claim the benefit under Title ubject matter of each of the claims of he first paragraph of Title 35, United 7, Code of Federal Regulations, § 1.5	and filed on (mm/dd) 35, United States Code, § 120 of a this application is not disclosed in States Code, § 112, I acknowledg (66(a) which occurred between the	/yyyy) my United States application the prior United States apeter the duty to disclose mater	Yes No No national No
pplication number hereby claim the benefit under Title ubject matter of each of the claims of the first paragraph of Title 35, United 7, Code of Federal Regulations, § 1.5 tternational filing date of this applica	and filed on (mm/dd 35, United States Code, § 120 of a this application is not disclosed in States Code, § 112, I acknowledg 66(a) which occurred between the tion.	/yyyy) any United States application the prior United States apete the duty to disclose mater filing date of the prior application.	Yes No No national No

Send Correspondence to:

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I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application of any patent issuing thereon.

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Inventor's Signature		Date
Inventor's Signature		7-7-03
/	<u> </u>	
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·		
Signature		Date
Fourth Inventor		· *
Given Name	Family Name	
Residence (City, State & Country)		Citizenship
Mailing Address		
_		
Signature .		Date
I		

POWER OF ATTORNEY

I hereby appoint the practitioners at Customer No. 29338 as my attorneys or agents to prosecute the United States Letters Patent Application titled:

Lie-Down Massager

and to transact all business with full power of substitution and revocation in the United States Patent and Trademark Office connected therewith, unless the inventor(s) or assignee(s) provides said practitioners with a written notice to the contrary.

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I, the undersigned, declare that I am the owner of the above-mentioned application or, if the owner is a corporation, partnership, or other association, I am authorized to make this appointment on behalf of the owner, and I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application of any patent issuing thereon.

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Mailing Address		:	
Signature		Date	
Fourth Inventor			
Fourth Inventor Given Name	Family Name		
Mailing Address			
Signature		Date	

(Rev. 10/11/02)